

Developing a Simulation-Based Training Program for Non-Traditional Caregivers

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Introduction: Simulation-based training enables learning in controlled environments which nevertheless mimic real-world scenarios. It has proven effective in the training of medical personnel and affords rapid assimilation and integration of necessary skills. Non-traditional caregivers often operate in austere environments, where resource and personnel limitations preclude more standard provision of care by highly trained and fully equipped health care teams. In these settings, training time for the caregivers may be limited, with long gaps between time of the training and use of the skills, a limited grasp of the underlying physiology, and unfamiliarity with "medical English" which can render it difficult to communicate concepts to more advanced practitioners when such interaction can take place, as for example, when telemedicine can be used to project medical skills further forward. Methods: Simulation-based training can assist in the familiarization of caregivers to the environment, ensure adequate execution of skills at the appropriate time(s), and allow practice of telemedicine communication patterns between the mentor and caregiver. Results: Scenario-based training can and has been used for initial and sustainment training modules, including self-taught modules for use in the field. Strict identification of the critical concepts is vital, as is development and practice of technically simple procedures wherever possible. Medical devices can off-load tasks from caregivers, as well as to minimize the necessary level of caregiver knowledge, while integrated simulations among all members of the mission team can improve communication and efficiency. Discussion: Non-traditional caregivers face unique challenges when learning to provide medical care. Scenario-based curricula allow lesson plans to be tailored to each group's individual needs, as well as being suited for the participation of numerous groups, including the caregiver, evacuation/transport staff, decision-makers, and hospital-based physician.